State of Indiana Employee Health Benefits

Jennifer Peschke
Benefits Manager
Indiana State Personnel Department



State of Indiana Anthem Benefit Comparison Summary of Benefits for 2015

	Wellness CDHP		CDI	CDHP 1		CDHP 2		onal PPO
	In-Network	Out of Network						
Deductible		•						
Single	\$2,	500	\$2,	500	\$1,	500	\$750	\$1,500
Family	\$5,	000	\$5,	000	\$3,000		\$1,500	\$3,000
Out-of-Pocket Maximum								
Single	\$4,	000	\$4,	000	\$3,000		\$3,000	\$6,000
Family	\$8,	000	\$8,	000	\$6,000		\$6,000	\$12,000
Office Visit	20%	40%	20%	40%	20%	40%	30%	50%
Inpatient	20%	40%	20%	40%	20%	40%	30%	50%
Emergency Room	20%	20%	20%	20%	20%	20%	30%	30%
Urgent Care	20%	20%	20%	20%	20%	20%	30%	30%
	0%	40%	0%	40%	0%	40%	0%	50%
Wellness and Prevention	(no deductible)							

Prescription Drug Summary

	Retail	Mail	Retail	Mail	Retail	Mail	Retail	Mail
	(up to 30 days)	(up to 90 days)	(up to 30 days)	(up to 90 days)	(up to 30 days)	(up to 90 days)	(up to 30 days)	(up to 90 days)
Preventive	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(mandated by the ACA)	(no deductible)	(no deductible)	(no deductible)	(no deductible)	(no deductible)	(no deductible)	(no deductible)	(no deductible)
Generic	\$10 copay	\$20 copay	\$10 copay	\$20 copay	\$10 copay	\$20 copay	\$20 copay	\$40 copay
	20%	20%	20%	20%	20%	20%	30%	30%
	Min \$30, Max	Min \$60, Max	Min \$30, Max	Min \$60, Max	Min \$30, Max	Min \$60, Max	Min \$40, Max	Min \$80, Max
Brand, Formulary	\$50	\$100	\$50	\$100	\$50	\$100	\$60	\$120
	40%	40%	40%	40%	40%	40%	50%	50%
	Min \$50, Max	Min \$100, Max	Min \$50, Max	Min \$100, Max	Min \$50, Max	Min \$100, Max	Min \$70, Max	Min \$140, Max
Brand, Non-Formulary	\$70	\$140	\$70	\$140	\$70	\$140	\$90	\$180
	40%		40%		40%		50%	
	Min \$75, Max \$150		Min \$75, Max \$150		Min \$75, Max \$150		Min \$100, Max \$175	
Specialty	(30 day	supply)	(30 day	supply)	(30 day supply)		(30 day supply)	



2015 Rates

Plan	Coverage	Minimum Bi-weekly Employee Rate	Maximum Bi-weekly Employer Rate	Bi-weekly Rate	Monthly	Maximum Monthly Employer Rate	Monthly	Minimum Annual Employee Rate	Maximum Annual Employer Rate	Annual Total Rate
Wellness	Single	\$45.98	\$174.30	\$220.28	\$99.62	\$377.65	\$477.27	\$1,195.48	\$4,531.80	\$5,727.28
	Family	\$70.04	\$530.04	\$600.08	\$151.75	\$1,148.42	\$1,300.17	\$1,821.04	\$13,781.04	\$15,602.08
Wellness	Single	\$10.98	\$174.30	\$185.28	\$23.79	\$377.65	\$401.44	\$285.48	\$4,531.80	\$4,817.28
W/ Non-Tobacco Use Incentive	Family	\$35.04	\$530.04	\$565.08	\$75.92	\$1,148.42	\$1,224.34	\$911.04	\$13,781.04	\$14,692.08
CDUD 4	Single	\$53.12	\$183.90	\$237.02	\$115.09	\$398.45	\$513.54	\$1,381.12	\$4,781.40	\$6,162.52
CDHP 1	Family	\$92.84	\$549.24	\$642.08	\$201.15	\$1,190.02	\$1,391.17	\$2,413.84	\$14,280.24	\$16,694.08
CDHP 1	Single	\$18.12	\$183.90	\$202.02	\$39.26	\$398.45	\$437.71	\$471.12	\$4,781.40	\$5,252.52
W/ Non-Tobacco Use Incentive	Family	\$57.84	\$549.24	\$607.08	\$125.32	\$1,190.02	\$1,315.34	\$1,503.84	\$14,280.24	\$15,784.08
ODUDO	Single	\$112.16	\$199.38	\$311.54	\$243.01	\$431.99	\$675.00	\$2,916.16	\$5,183.88	\$8,100.04
CDHP2	Family	\$256.58	\$580.20	\$836.78	\$555.92	\$1,257.10	\$1,813.02	\$6,671.08	\$15,085.20	\$21,756.28
CDHP 2	Single	\$77.16	\$199.38	\$276.54	\$167.18	\$431.99	\$599.17	\$2,006.16	\$5,183.88	\$7,190.04
W/ Non-Tobacco Use Incentive	Family	\$221.58	\$580.20	\$801.78	\$480.09	\$1,257.10	\$1,737.19	\$5,761.08	\$15,085.20	\$20,846.28
Tue I'd and DDC	Single	\$260.78	\$222.42	\$483.20	\$565.02	\$481.91	\$1,046.93	\$6,780.28	\$5,782.92	\$12,563.20
Traditional PPO	Family	\$667.88	\$626.28	\$1,294.16	\$1,447.07	\$1,356.94	\$2,804.01	\$17,364.88	\$16,283.28	\$33,648.16
Traditional PPO	Single	\$225.78	\$222.42	\$448.20	\$489.19	\$481.91	\$971.10	\$5,870.28	\$5,782.92	\$11,653.20
W/ Non-Tobacco Use Incentive	Family	\$632.88	\$626.28	\$1,259.16	\$1,371.24	\$1,356.94	\$2,728.18	\$16,454.88	\$16,283.28	\$32,738.16



Rate History

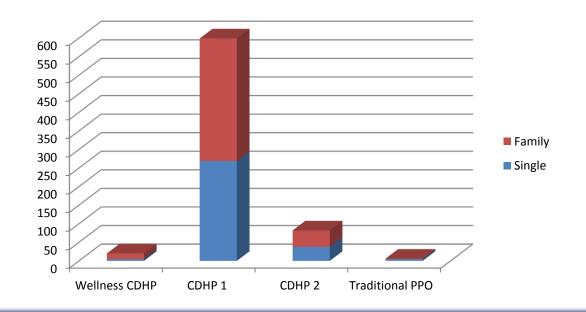
Plan	Coverage	2009	2010	2011	2012	2013	2014	2015
	Single							\$4,817.28
Wellness CDHP	Family							\$14,692.08
CDUD 4	Single	\$3,169.92	\$3,336.84	\$3,713.32	\$4,134.52	\$4,564.56	\$4,815.72	\$5,252.52
CDHP 1	Family	\$9,750.00	\$10,380.24	\$3,336.84 \$3,713.32 \$4,134.52 \$4,564.56 10,380.24 \$11,655.28 \$12,967.24 \$13,721.76 \$4,431.96 \$4,822.48 \$5,229.64 \$6,026.28 12,771.72 \$13,995.28 \$15,691.00 \$17,476.68 \$6,703.32 \$7,568.08 \$8,393.32 \$9,704.76 18,880.68 \$21,408.40 \$23,941.84 \$27,268.80	\$14,475.24	\$15,784.08		
	Single	\$4,112.16	\$4,431.96	\$4,822.48	\$5,229.64	\$6,026.28	\$6,377.28	\$7,190.04
CDHP 2	CDHP 2	\$15,691.00	\$17,476.68	\$18,493.80	\$20,846.28			
Tundikinund	Single	\$6,176.82	\$6,703.32	\$7,568.08	\$8,393.32	\$9,704.76	\$10,275.72	\$11,653.20
Traditional	Family	\$17,306.64	\$18,880.68	\$21,408.40	\$23,941.84	\$27,268.80	\$28,870.92	\$32,738.16
NA/-III-	Single	\$5,404.62	\$5,973.50					
Welborn	Family	\$14,878.50	\$16,485.56					

^{*} Rates assume participation in the NTUA



School Membership

	Single	Family	Total
Wellness CDHP	5	15	20
CDHP 1	269	330	599
CDHP 2	38	44	82
Traditional PPO	5	1	6





What Can Be Customized

Eligibility

• School corporations can define eligible employees as full-time, part-time or minimum number of hours/week.

The Rate Split

 School corporations shall not pay more than the State; the school corporation employees shall pay at least the amount paid by a State employee.

Contributions to an HSA

• Your school can decide if you will contribute, how much you will contribute and which financial institution(s) you will use.

Example of State of Indiana employer contributions to State employee HSAs for 2015

HSA Accounts	Coverage	Initial Contribution	Bi-Weekly Contribution	Monthly Contribution	Maximum Annual Employer Contribution	
Wellness		\$625.56	\$24.06	\$52.13	\$1,251.12	
Weilliess	Family	\$1,251.12	\$48.12	\$104.26	\$2,502.24	
HSA 1	Single	\$500.76	\$19.26	\$41.73	\$1,001.52	
IIOA I	Family	\$1,001.52	\$38.52	\$83.46	\$2,003.04	
HSA 2	Single	\$299.52	\$11.52	\$24.96	\$599.04	
IIOA Z	Family	\$599.04	\$23.04	\$49.92	\$1,198.08	



What Cannot Be Changed

Plan Design

- Plan designs are set by the State.
- You must offer all plans to all benefit eligible employees.

Inclusion

• All benefit eligible employees in your school corporation must be included. You cannot split out employees by classifications/groups.

Dependent Definition

Definition of dependent is set by the State.



Eligible Dependents

Spouse: An Individual to whom you are legally married. IC 31-11-8-5 provides: a marriage is void if the marriage is a common law marriage that was entered into after Jan. 1, 1958. Employees are not allowed to claim dependents based on common law marriages.

Children: Natural-, step-, foster, or legally adopted children; children who reside in the employee's home for whom the employee or spouse has been appointed legal guardian or awarded legal custody by a court, until the end of the month in which they turn 26

If the dependent child is both incapable of self-sustaining employment by reason of mental or physical disability and is chiefly dependent upon the employee for support and maintenance prior to age 19, the dependent child's coverage shall continue if satisfactory evidence of such disability and dependency is received within 120 days after child's 26th birthday. Coverage for the dependent will continue until the employee discontinues his coverage or the disability no longer exists.



Fees

Information Fee

• Similar to a monthly premium

COBRA Administration

• \$1.26 per employee per month



Plan Administration

State

- Notify school of any changes to plans (including Open Enrollment)
- Sample communications

Insurance Carriers

- Send billing inquiries and adjustments.
- Administer COBRA

School Corporation

- Administration of HIPAA
- Administration of FMLA



Benefit Eligibility

Open Enrollment

- Occurs at the same time as Open Enrollment for State employees
- Benefit changes will be effective on January 1st

New Employees

 Benefits effective on the first day of the month following their date of hire.

Terminated Employees

 Benefits terminate on the last day of the month in which they separate employment.



School Benefit Coordinator Role

Communications

 Communicate benefit options and open enrollment information for current and new employees.

Enrollment

- Complete enrollment of current and new employees on medical plans.
- Paper applications or Anthem Employer Access

Carrier Notification

Update carriers with eligibility and plan enrollment information

Payroll

 Inform school payroll of benefit adjustments and verify correct deductions for employees



Additional Benefits

Anthem 360° Health program:

- 24/7 NurseLine: 888-279-5449
- Condition Care assisting members in managing symptoms related to the most frequently diagnosed conditions.
- Complex Care reaching out to members with multiple health care issues to offer support and assistance.
- Case Management working with members to achieve health goals designed for specific circumstances, such as a recent hospital stay.





HumanaVitality

- An online tool for employees to manage their well-being
- Employees can qualify for the 2016 Wellness CDHP by earning Silver Status within Humana Vitality by August 31, 2015
- The quickest path to Silver status within the program includes completing the:
 - 1) Health Assessment
 - 2) Vitality Check
 - 3) Action Items recommended within Humana Vitality to take charge of your health.





Castlight

- A healthcare cost transparency tool for employees to find the highest quality, lowest cost providers in their area.
- Features:
 - Up to date deductible and out-of-pocket maximum status.
 - Step-by-step explanations of past medical spending.
 - Comparing nearby doctors, medical facilities and healthcare services.
 - Personalized cost estimates.



Getting Started

Binder Agreements

- Term of three (3) years.
- Must be signed no later than 30 days prior to the start of the effective date of the school corporation.

Plan Information

- Provide current plan and enrollment information to State Personnel.
- Determine your rate split prior to employee education sessions. (this will also need to be done prior to each open enrollment period)

Enrollment

- Employee education sessions held no more than 30 days prior to effective date.
- Benefit applications or electronic enrollment must be submitted to the carrier no later than 30 days prior to the effective date.



Contacts

Jennifer Peschke

Benefits Manager
Indiana State Personnel Department
317-234-7265
ipeschke@spd.in.gov

Christy Tittle

Benefits Director
Indiana State Personnel Department
317-232-3241
ctittle@spd.in.gov



Additional Resources

Websites

Interested School Corporations http://www.in.gov/spd/2755.htm

Participating School Corporations http://www.in.gov/spd/2756.htm

Email

BenefitingSchools@spd.in.gov

